PART B - FEE(S) TRANSMITTAL

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

WASHINGTON DC SUGHRUE/265550

CUSTOMER NUMBER

SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW **SUITE 800**

WASHINGTON, DC 20037

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

									•				
APPLICATION N	FILING DATE FIR		FIRS	ST NAMED INVENTOR			ATTORNEY DOCKET NO.			CONFIRMATION NO.			
10/568,709			02/17/2006		Yoichi YAMAMOTO		<u> </u>	Q93301			4844		
TITLE OF INVENTIO	N: VOLT	AGE SOU	IRCE INVE	RTER CONT	ROL METHO	D							
APPLN. TYPE SMALI ENTITY		MALL ISSUE		FEE PUBLICAT		ION	PREV. PAID	ISSUE FEE TOTAL		L FEE(S) DATE DU		DUE	
		TTY			FEE				DUE				
nonprovisional	al NO		\$1440.00		\$300.00		\$0.	00	\$1,740.0	0	03/27/2008		
EXAMINER					ART UNIT		CLASS-SU	UBCLASS					
Rina I DUDA					2837	2837		9000					
1. Change of correspon							-	patent front p	_	1 Sugh	rue Mion, F	rllC	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.						(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2							
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev													
03-02 or more recent) ATTACHED. Use of a Customer Number is required.						member a registered attorney or agent) and the 3 names of up to 2 registered patent attorneys or							
						agents printed		is listed, no na	ame will be				
3. ASSIGNEE NAME	AND RES	SIDENCE	DATA TO E	E PRINTED	ON THE PAT								
PLEASE NOTE: Unle									entified below,	the docum	nent has bee	en filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											-		
KABUSHIKI KAISHA	A YASKA	WA DENI	CI	F	ukuoka, Japan								
DI 1 1 1	•			' /'II		.1	A). [] In Abril 4.	-1 7 C			i 🗆 C		
Please check the appro			ory or catego	nes (will not			-						
5 ()						4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.							
						☐ Payment by credit card. Form 1310-2038 is attached.							
☐ Advance Order - # of Copies ☐ TI						The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any verpayment, to Deposit Account Number 19-4880 (enclose an extra copy of this form).							
				•			=		narge all requir				
									o said Deposit A		•		
5. Change in Entity Sta	•		•										
a. Applicant claims									NTITY status.				
The Director of the US		-											
NOTE: The Issue Fee party in interest as sho							ner than the ap	plicant; a regis	tered attorney o	or agent; o	r the assign	ee or other	
Authorized Signature	authorized Signature /Chidambaram. S. Iyer/				/	Date			March 4, 2008				
Typed or Printed Name	e	(Chid S. Iyer			Regist	ration No.		43,355				
·								03/05/200	8 AWONDAF2 0	0000032	194880	10568709	
Modified PTOL-85 (R	ev. 08/07)	Approved	for use thro	igh 08/31/20	10.			01 FC:150 02 FC:150		.08 DA			